PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2004

Application or Docket Number

09/813767

		CLAIMS A		(Column 1)		(Column 2)		SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS		Coluit	11117	COI	311111 2)		TYPE		OP		ENTITY	
FOR			ļ		4.5	A second		RATE	FEE	┥.	RATE	FEE
FOR			NUMBE	R FILED	NUMI	BER EXTRA		BASIC FE	\$375	OF	BASIC FEE	\$750
TOTAL CHARGEABLE CLAIMS			m	minus 20= '				X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			n	minus 3 =				X43=		OR	X8 6 =	
M	JLTIPLE DEPE	NDENT CLAIM F	PRESENT					+145=		OR		
*	the difference	e in column 1 is	s less than 2	ero, enter	"0" iņ (column 2		TOTAL		OR	<u> </u>	
, CLAIMS AS AMENDED - PART II							101/12	<u>.</u>			THAN	
<u></u>	5 2 04 (Column 1) (Column 2) (Column 3						_	SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT ₹		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	12	Minus	** 4	0) I		X\$ 9=		OR	X\$18=	
AME	Independent	$+\Psi_{\cdot}$ ENTATION OF M	Miņus	*** A	<u> </u>	=		X43=		OR	X86 =	
<u> </u>	TINOTENES	ENTATION OF IV	OLTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=	
							L	TOTAL		ا ۱	TOTAL	
		(Column 1)		(Colum	nn 2)	(Column 3)	,	ADDIT. FEE	L		ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST SER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		='		X4 3 =		1 1	X8 6 =	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	•	
			•				L	+145=		OR	+290=	
				· 1			A	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
S S	Independent	*	Minus	***		=		X4 3 =	·		X86=	
\Box	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT (CLAIM		-			OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145≜ TOTAL	<u> </u>	OR	+290=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE	
T	he "Highest Num	mber Previously Pai ber Previously Pai	d For" (Total or	o oraue is i Independen	less than t) is the i	i 3, enter "3." highest number		-	ropriate box			